MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2RD AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
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TOTAL IND.	2					
TOTAL DEP.	17					
TOTAL CLAIMS	19					

37
18
19

		IND	DEP	IND	DEP	IND	DEP
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TOTAL IND.							
TOTAL DEP.							
TOTAL CLAIMS							